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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	ney Docket No. 03500.017608				
First Nar	ned Inventor or Application Identifier				
HIROKI SUE ET AL.					
Evames Mail Label No.					

(S.i.) is its is its instance and		Exp	oress Mail L	Label No.			
APPLICATION ELEME See MPEP chapter 600 concerning utility paten	S .	ADDRE	ESS TO:	Commiss P.O. Box	Patent Application ioner for Patents 1450 a, VA 22313-1450		
1. Fee Transmittal Form (Submit an original, and a duplicate for fee	processing)		7.	CD-ROM or Program (A	r CD-R in duplicate		
2. Applicant claims small entity status. See 37 CFR 1.27.			8.	_	and/or Amino Acid e, all necessary)	I Sequence Subm	ission E
3. X Specification Total F	ages 27			a C	Computer Readabl	e Form (CRF)	303'
4. X Drawing(s) (35 USC 113) Total S 5. X Oath or Declaration Total F				i(ation Sequence Lis CD-ROM or CD-R paper	_	22241 U. 10/63
a. X Newly executed (original or	сору)	_		c S	Statements verifyin	ng identity of above	e copies
		L		ACCOM	PANYING APPLIC	CATION PARTS	
b. Copy from a prior application (for continuation/divisional wi	th Box 17 completed)		9. X	-	Papers (cover shee		of A44
Signed Statement		ا موء	10.	(when there	is an assignee)	Power	of Attorney
37 CFR 1.63(d)(2)		, 300	11	English Tra	nslation Documen	t (if applicable)	
6. X Application Data Sheet. See 37 CFR	1.76		12	Statement (Disclosure (IDS)/PTO-1449 Amendment	Copies Citatio	s of IDS ins
			14. X	Return Rec	eipt Postcard (MP		
			15.		opy of Priority Doc riority is claimed)	ument(s)	
			16	Other:			
17. If a CONTINUING APPLICATION, check a	nnronriate boy and s	unnly th	e requisite	information			
Continuation Divisional Prior application information: Examiner_		-	part (CIP)		lication No/_		
For CONTINUATION OR DIVISIONAL APPS only: considered a part of the disclosure of the accompan be relied upon when a portion has been inadvertently	ying continuation or div	isional a	application a	nd is hereby ir	an oath or declaration	on is supplied under ence. The incorpor	Box 5b, is ration can only
	18. CORRE			RESS			
X Customer Number or Bar Code Label	(Insert Customer No	0551 or Attacl		ibel here)	or Corres	spondence address	below
NAME							
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City	State				Zip Code		
Country	Telephone			-	Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	10-20 =	0	X \$ 18.00 =	\$000.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	2-3 =	0	X \$ 84.00 =	\$000.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$280.00 =	\$000.00
				BASIC F (37 CFR 1.16	6(a))
			Total of	above Calculation	is = \$750.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9,	1.27, 1.28).	Ä
				TOTA	L = \$750.00
a.		ntity statement is enclose ntity statement was filed i		al application and	such status is still proper
b.	A small er	ntity statement was filed i	n the prior nonprovision	al application and	such status is still proper
C.		er claimed.	•		
20.	X A check in the amo	ount of \$ <u>750.00</u> to cove	r the filing fee is enclose	ed.	,
21.	X A check in the amo	ount of \$ <u>40.00</u> to cov	er the recordal fee is en	closed.	
22. Th	ne Commissioner is hereb o. 06-1 <u>205:</u>	y authorized to credit ove	erpayments or charge th	e following fees to	Deposit Account
a.	X Fees requ	ired under 37 CFR 1.16.			
b.	X Fees requ	ired under 37 CFR 1.17.			

	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED
NAME	Frank A. DeLucia (Reg. No. 42,476)
SIGNATURE	Trank June
DATE	August 1, 2003